DRAFT DRAFT

RESOLUTION ON ACCESS TO MEDICATIONS

WHEREAS Medicaid is a state and federal partnership designed to provide health care services to low-income and frail Floridians as well as those with disabilities; and

WHEREAS it is the mission of the Agency for Health Care Administration ("AHCA" or "Florida Medicaid") to champion accessible, affordable, quality health care for all Floridians; and

WHEREAS Florida Medicaid currently provides crucial health care services to nearly 2.2 million people who are among the most vulnerable in our state including persons with HIV/AIDS, mental illness, substance abuse, diabetes, asthma and other chronic and debilitating illnesses; and

WHEREAS approximately 59 percent of Florida's Medicaid funding is provided by the federal government; and

WHEREAS Senate Bill 404 passed by the 2005 Florida Legislature requires Florida Medicaid to apply step therapy or "fail first" therapy for drugs not included on a preferred drug list, subject to certain exceptions including the physician's written documentation that a particular drug is medically necessary for their patient; and

WHEREAS Medicaid patients typically receive medications appropriately prescribed by their physician in order to control a variety of medical conditions and it is unconscionable to disrupt a successful therapeutic drug regimen of a seriously ill patient by requiring them to fail first on other medications; and

WHEREAS Medicaid patients typically receive medication appropriately prescribed by their physician in order to control a variety of medical conditions and it is unconscionable to require an ill patient to switch medications concurrently if those medications are subject to prior authorization failure therapy; and

WHEREAS chronically ill patients who remain stable on their medications are more likely to experience an improved quality and length of life and reduced physicians office and costly emergency room visits; and

WHEREAS the Centers for Medicare and Medicaid Services has issued a guidance to state Medicaid directors regarding continuity of care urging states to

be mindful of patients who are stabilized on previously prescribed medications; and

WHEREAS, the use of prescription drugs by Medicaid patients can be controlled by patient-centered programs that provide for the development and adoption of best-practice guidelines for the prescribing and use of drugs in the Medicaid program, the review of prescriber patterns based on national standards, and the use of improved patient adherence to medication plans as required by Florida's 2005 Medicaid Reform Legislation;

THEREFORE BE IT RESOLVED that we, the undersigned, request that the P&T Committee and the Agency for Health Care Administration support the following recommendations:

- 1. Allow current Medicaid patients to remain on their current medications without applying any new prior authorization step therapy requirements;
- 2. Gradually phase in any new prior authorization step therapy requirements after careful consultation with medical specialists and Medicaid consumers (outside of the P&T committee) to prevent harmful clinical consequences flowing from abrupt changes in patients' medications;
- 3. Ensure that all prior authorization, including requests for exceptions to step therapy, are granted by AHCA within 24 hours.
- 4. Monitor and report the impact of new prior authorization step therapy requirements including review of the agency's capacity to timely respond to prior authorization requests; review of paperwork requirements for physicians to ensure they are not a barrier to access; review of clinical outcomes for Medicaid patients; and review of the fiscal impact of prior authorization-step therapy requirements on the overall Medicaid and state budget (such as impact on the Medicaid hospitalizations, Baker Act admissions, arrests and incarcerations, etc.)

Supporting Organizations: